0,11	
 75	Application or Docket Number

PATENT	APP	LICA	TION	FEE	DET	<b>TERM</b>	INAT	ION	RECOF	₹D
				_						

Effective December 29, 1999														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAL		- 1	OR	OTHER	
FOR NUMBER FILED NUMBER EXTRA							_	RATE		FEE	]	RATE	FEE	
BASIC FEE								· · · ·		345.00	OR		690.00	
TOTAL CLAIMS 2 minus 20= · /									X\$ 9	=		OR	X\$18=	18
INDEPENDENT CLAIMS if minus 3 = 1									X39=	-		OR	X78=	18
MULTIPLE DEPENDENT CLAIM PRESENT								Ī	+130	_		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2								L	TOTA			OR	TOTAL	186
CLAIMS AS AMENDED - PART II									, ,	L			OTHER	
			umn 1)			umn 2)	(Column 3)	_	SMAL	L E	YTITY	OR	SMALL	ENTITY
AMENDMENT A	·	REM	AIMS IAINING FTER NDMENT		PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	.5	ĺ	Minus	<u></u>		=		X\$ 9	=		OR	X\$18=	
AME.	Independent	· _	7	Minus	•••	· ·	=	ſ	X39=			OR	X78=	
	FIRST PRESE	NTATIO	ON OF ML	JETIPLE DEF	IPLE DEPENDENT CLAIM					_		1	+260=	
								L	+130: TOT			OR	TOTAL	
										EE L		OR	ADDIT, FEE	
			umn 1) Aims	r——		umn 2) iHEST	(Column 3)	-				•		
AMENOMENT B		REN Al	IAINING FTER NDMENT		PREV	MBER VIOUSLY D FOR	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. (4		Minus	<	5/	=		X\$ 9=	-		OR*	X\$18=	180
AME	Independent	· į	1	Minus	•••	7	=	Ī	X39=	1		OR	X78=	344
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							T	+130=	=		OR	+260=	1
,								A	TOT. DDIT. FI			OR	TOTAL ADDIT, FEE	
			umn 1)			umn 2)	(Column 3)							
AMENDMENT C		REM Al	AIMS IAINING FTER NDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	:  ⊤	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	10		Minus	••	1	u,		X\$ 9=	1	\	OR	X\$18=	\
AME	Independent	<u>• [ (</u>		Minus			= ,	t	X39=	十	+	1	X78=	,
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+	<del>-/</del>	OR		-
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3										OR	+260=			
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT.									TOTA DDIT. FE			OR	TOTAL ADDIT, FEE	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

FORM PTO-875 (Rev. 12/99)

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